Rev. 06/2006	LOBBYIST MONTHLY REPORT FORM							Page of Page(s)			
State of Idal	To Be Filed By:					1	"	IIS SPACE	FOR OFFICE US	E ONLY	
Ben Ysurs: Secretary of S	1	L-3 LOBBY			YISTS 57-6619)			R-I PN 3:38			
					STATE			ANY OF STATE E OF IDAHO			
(Type or print clear See instructions at						•					
Lobbyist's name and permanent busine			Da	Date prepared			Period covered				
Patrick V. Collins								month ending			
P.O. Box 1617 Boise, ID 83701-1617					03/01/07			(Mo.) (Day)	(Yr.)	
00130,100 007 01-1017								02	28	2007	
	ole expenditures made o		•	•		<u> </u>				yer.	
Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for Item 3, at holtom of page.)									s, under		
Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported		Emplo	1 Employer No. 2		Employer No. 3		Employer No. 4				
Entertainment Food and Refreshment \$. s			_ s		2	s			
Living Accommodations					.						
Adventising				_ l							
Travel											
Telephone				_							
Other Expenses or Services				_							
Total	s0.00	s	0.	00	s	0.00	s	0.00	s	0.00	
•When the number of employers you	u are reporting for require	i is multiple	L-2 for	ms to b	e filed a	total amount	i for all employe	rs shoul	d he entered o	n Pago I.	
When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. Item The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. Date Place Amount Names of Legislators, Public and Executive Officials in Group											
2 Date	Place			mount	Na	mes of Legisi	ators, Public and	Execut	ive Officials i	n Group	
			•								
Continued on attached page(s)					•						
				Iten 3	<u>, </u>						
INSTRUCTIONS				3		tim	ployer(s) Name(s	s) and A	Mas(cs)		
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code				No. 1 Idaho Banker's Association 512 W Bannock, Boise, ID 83702							
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.				No. 2 Idaho Health Facilities Authority 1607 W Jefferson, Boise, ID 83702							
TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282				No. 3			,	301 04			
				No. 4							